

Bob Holden
Governor



State of Missouri
OFFICE OF ADMINISTRATION
Post Office Box 809
Jefferson City
65102
(573) 751-8130
Fax: (573) 522-8078
<http://www.oa.mo.gov/oeo/>

Jacquelyn D. White
Commissioner

Marvin R. Eason
Director
Office of Equal Opportunity

Dear Business Owner:

The Office of Administration, Office of Equal Opportunity has a statewide certification program coordinated by the Office of Contract Compliance-MBE/WBE Certification Program. This unit is certifying Minority and Women Business Enterprises (MBE and WBE) who are 51% owned and controlled and interested in contracting with the state in areas of professional and general services, commodities, information technology and construction.

If you are interested in becoming certified with the state, please complete the enclosed application and return it to the following address:

Office of Administration
Office of Equal Opportunity
MBE/WBE Certification Program
P.O. Box 809/301 W. High Street, Room 840
Jefferson City, MO 65102

If you have any questions, please feel free to contact our program at (573) 526-1467 or (877) 259-2963.

Nancy C. Heyer
M/WBE Certification Coordinator

Enclosure

STATE OF MISSOURI



APPLICATION FOR CERTIFICATION

as a

**Minority Business Enterprise (MBE)
Women Business Enterprise (WBE)**

☐ **Standard Application-Standard Document List**

The Standard application with the Standard document list must be completed by all Missouri applicants who have not previously been certified as MBE or WBE by another certifying entity. All non-Missouri applicants must also complete this Standard Application and Standard document list.

☐ **Sole Proprietorship**

Standard Application-Sole Proprietor Document List

The Standard application with the Sole Proprietor Document List must be completed by any business classified as a sole proprietorship regardless of location.

☐ **Rapid Response Process**

Standard Application /Rapid Document List

This process is **only available to Missouri firms** who are already certified by one of the following certifying entities below. The Standard application with the Rapid Response Document List must be completed.

**Kansas City Human Relations Department
U.S. Small Business Administration 8 (a) Program
Kansas City Minority Supplier Development Council
St. Louis Minority Business Council
Missouri Department of Transportation
St. Louis Lambert International Airport Authority
Metro
National Women Business owners Corporation (NWBOC)**

MBE/WBE Certification Program

(573) 526-1467 Toll free (877) 259-2963 Fax: (573) 522-8078

STATE OF MISSOURI OFFICE OF ADMINISTRATION OFFICE OF EQUAL OPPORTUNITY

INSTRUCTIONS FOR COMPLETING THE MBE/WBE APPLICATION

Check appropriate box on the affidavit designating Standard or Rapid Response Certification

PART I-IDENTIFICATION

- Line 1: Enter the name of the principal owner(s) of the applying business.
- Line 2: Enter the legal name of the business as filed with the appropriate county, state and/or federal governments.
- Line 3: Enter the street address of the business, home office or headquarters.
- Line 4: Enter city, county, state, zip code of the business home office.
- Line 5: Enter the business telephone number as provided to the public. Enter the home telephone number of the principal owner. Enter facsimile number if applicable. Enter e-mail address.
- Line 6: Mark the appropriate box: Missouri Corporation, Partnership, Limited Liability Company (LLC), or Non-Missouri Corporation. A Corporation is a business that has complied with the requirements of the State of Missouri, Secretary of State's Office. A Partnership is defined as two or more persons who have joined together to carry on a trade or business with each person contributing money, property, labor or skill, and each expecting to share in the profits and losses of the business. A Limited Liability Company is a non-corporate business whose owners actively participate in the organization's management and are protected against personal liability for the organization's debts and obligations. A Sole Proprietor is a company with one owner where the business and owner are considered as one and the same. If you marked Non-Missouri Corporation you must provide a copy of your home state MBE/WBE certification.

Line 7: Mark the appropriate box in accordance with the following definitions:
MBE, a Minority-Owned Business Enterprise or WBE, a Woman-Owned Business Enterprise means an individual, partnership, corporation, limited liability company or joint venture of any kind that is owned and controlled by one or more persons who are:

MBE

“Minority-Owned Business Enterprise” or “MBE” means United States citizen(s), a sole proprietorship, partnership, corporation or joint venture, owned, operated and controlled by a minority group member or members who have at least 51% ownership. The minority group member(s) must have day-to-day operational and managerial control, and an interest in capital and earnings commensurate with his/her/their percentage of ownership.

WBE

“Women-Owned Business Enterprise” or “WBE” means United States citizen(s), a sole proprietorship, partnership, or corporation owned, operated and controlled by a woman or women who have at least 51% ownership. The woman or women must have day-to day operational and managerial control, and an interest in capital and earnings commensurate with her or their percentage of ownership.

Line 8: Mark the appropriate box for gender. Indicate the minority group which best identifies your background if applying for certification as a MBE:

- (a) African American
- (b) Hispanic American
- (c) Native American
- (d) Asian American

Line 9: Enter the date the business started. The state’s MBE/WBE Certification Program requires that you have been in business for at least six months.

Line 10: Provide in detail any changes in ownership and control of this business and supportive documentation of those changes (i.e., meeting minutes/stock ledger/stock certificates).

Line 11: Enter the total number of employees, full-time and part-time including yourself.

Line 12: Enter the Federal Employer Identification Number or Social Security Number if you do not have a Federal Employer Identification Number.

Line 13a: Mark the appropriate box, which explains your company’s ability and willingness to bid and accept state contracts.

Line 13b: Please check yes or no to indicate if you have registered with the Division of Purchasing & Materials Management as a vendor. If you have not, please do so at www.moolb.mo.gov/Glue/default.asp. Note: Being registered allows your company to be automatically notified by email of bids/proposals for those commodities and services you selected. It is important that you are aware registration is not the same as certification.

Registration is available to all businesses. Certification is required to be classified minority or woman business enterprise.

- Line 14: Enter your e-mail address (Please print clearly)
- Line 15: Mark and “X” beside each general term that describes your company.
- Line 16a: Describe policy decisions that demonstrate your control of the company. Control means “exercising the power to make policy decisions in the business.” The minority or woman principal owner(s) is required to be significantly involved in the control of the business. Actual examples of the decisions must be listed. “I make all the decisions” is not an acceptable response. Supportive documents should demonstrate the authority to make decision(s) and the specific decision(s) made.
- Line 16b: Describe your duties in operating your company. Operation means “the activity of being involved in the day-to day management of the business.” The minority or woman principal owner(s) is required to be significantly involved in the management of the business. Actual examples of the specific duties must be listed. “I do all the work” is not an acceptable response. Supportive documents should demonstrate the job position and duties performed.
- Line 17: Only new businesses should complete this section. Submit a business plan, which will show anticipated income for the next year.

PART II-OWNERSHIP INTERESTS

- Line 18: Identify all individuals or holding companies, list type of investment such as(real estate, equipment or cash), dollar amount or value of this contribution of capital and the source such as (i.e. canceled checks, loan, deed of ownership, title, etc) and attach the documentation verifying this information. If additional space is required, submit an attached sheet. In the case of a corporation and any stock, is a party to a contingent agreement, affecting the control or operation of this Corporation or the rights of the holders of any class of stock, please explain on a separate sheet. (For example: Divorce Settlement or Bankruptcy).
- Line 19: Partnerships, Limited Liability Companies and Sole Proprietors should complete this section. Indicate the name, race, gender and percentage of ownership/membership of all partners, members or owners.
- Line 20a: List the name, ethnicity, gender and title of current members of the Board of Directors.
- Line 20b: List the title, name, ethnicity, gender and annual salary of current corporate officers.
- Line 20c: Corporations should complete this section. List the name, ethnicity, and gender of current stockholders, number of shares owned and percentage of ownership.

PART III-AFFIDAVIT: The Affidavit must be signed, dated and notarized.

Note: Indicate on the document list those documents as enclosed or (NA) Not Applicable.

APPLICATIONS WITHOUT SUPPORTING DOCUMENTATION MAY BE RETURNED TO THE APPLICANT.

Supportive documents are required to verify ownership, operation and control.

CERTIFICATION PROCESS

- (1) Complete application and return with supportive documents.
- (2) Application and documents review.
- (3) On-site review conducted. (Only those businesses located in Missouri. Those applying through the Rapid Response Process do not require a site visit.)
- (4) Applicant notified of acceptance or denial of certification.
- (5) If denied, applicant can appeal to the Commissioner of the Office of Administration.
- (6) It is the applicant's responsibility to seek recertification. Under normal circumstances certified MBE/WBE's are sent notice to recertify.
- (7) Certified companies will be placed in the State of Missouri MBE/WBE Directory, at www.oa.mo.gov/oeo/cp.html.



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
OFFICE OF EQUAL OPPORTUNITY
MBE/WBE CERTIFICATION PROGRAM

Revised 5/1/04
☐ Standard
☐ Rapid Response

CERTIFICATION APPLICATION/AFFIDAVIT

PART I – IDENTIFICATION		Date:
1. Name of principal owner/owners	9. Date Business started (Mo/Day/Yr): __/__/____	
2. Full name of Business	10. Has this Business/Organization changed name, ownership, control or operational interest in the last five (5) years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter date __/__/____ Attach explanation.	
3. Street Address	11. Total # of Employees ____ Full Time ____ Part Time	
4. City State Zip Code County	12. Employer Identification or SSN	
5. Telephone-Business () Home Phone () Fax ()	13a. Are you prepared to bid or accept state contracts? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain on separate sheet. 13b. Have you registered on-line through the Division of Purchasing? Yes____ No____ (If no, see Instructions attached for details)	
6. Business Type: (Check One) ____ Missouri Corporation ____ Partnership ____ Sole Proprietorship ____ Limited Liability Company (LLC) ____ Non-Missouri Corporation	14. E-mail Address:	
7. Applying for Certification as a: <input type="checkbox"/> Minority-Owned Business Enterprise (MBE) <input type="checkbox"/> Woman-Owned Business Enterprise (WBE)	15. Check below all categories that best describe your business operation. Construction____ Professional____ Manufacturer____ Supplier____ Information Technology____ Attach separate page to describe specific services or commodities offered.	
8. <input type="checkbox"/> Male <input type="checkbox"/> Female <u>Minority Group</u> <input type="checkbox"/> African American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Asian American <input type="checkbox"/> Native American <input type="checkbox"/> Other _____	Note: Proof of United States Citizenship is mandatory for participation in this program. If you are located in another state, proof of your current home state certification is required. The Rapid Response Process requires the same verification.	

16a. Describe the policy decisions you make as principal owner.

16b. Describe the managerial duties you perform as principal owner.

17. Submit business plan, which will show, anticipated income for the next year (new businesses only).

PART II -- OWNERSHIP INTERESTS

18. Initial investment to acquire ownership interest in firm: Acquired ownership control by: ☐ Gift ☐ Self ☐ Loan

Note: #6 on document list requests proof of initial investment of each owner/member.

(If necessary attach additional sheet for each person making an initial contribution)

INVESTOR/OWNER	TYPE	AMOUNT/VALUE	SOURCE	DATE OF CONTRIBUTION
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19. This Section to be completed by Sole Proprietorship-Owner/Limited Liability Company-Members/Partnerships-Partners (use additional sheets, if necessary)

TITLE	NAME	RACE	SEX	%OF OWNERSHIP/MEMBERSHIP
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20a. CORPORATIONS ONLY. List current Board of Directors. (Use additional sheet if necessary)

NAME	RACE	SEX	TITLE

20b. List current Corporate Officers. (Use additional sheet if necessary)

TITLE	NAME	RACE	SEX	ANNUAL SALARY

Date and State of Incorporation	Name of Current Registered Agent	RACE/SEX
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20c. CORPORATIONS ONLY List all Stockholders (used additional sheets if necessary)

NAME	RACE	SEX	# OF SHARES	% OF STOCK OWNED

PART III-AFFIDAVIT (MUST BE COMPLETED)

THE UNDERSIGNED SWEARS THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT AND INCLUDE ALL MATERIAL INFORMATION NECESSARY TO IDENTIFY AND EXPLAIN THE OPERATION OF THE FIRM AS WELL AS OWNERSHIP AND CONTROL THEREOF. FURTHER, THE UNDERSIGNED AGREES TO PROVIDE DIRECTLY TO THE MBE/WBE CERTIFICATION PROGRAM CURRENT, COMPLETE AND ACCURATE INFORMATION AND MAY BE REQUIRED TO PROVIDE ADDITIONAL DOCUMENTATION. THE FIRM SHALL PERMIT THE EXAMINATION OF BOOKS, RECORDS AND FILES FOR THE PURPOSE OF DETERMINING CERTIFICATION ELIGIBILITY. ANY MATERIAL MISREPRESENTATION WILL BE GROUNDS FOR TERMINATING CERTIFICATION AND/OR ANY CONTRACT WHICH MAY BE AWARDED AND FOR INITIATING ACTION UNDER FEDERAL OR STATE LAWS CONCERNING FALSE STATEMENTS. FAILURE TO ANSWER ANY QUESTIONS OR TO SUPPLY THE OFFICE OF ADMINISTRATION, OFFICE OF EQUAL OPPORTUNITY WITH ANY DOCUMENTS REQUESTED WILL BE CAUSE FOR REJECTING THE APPLICATION FOR CERTIFICATION AS A MBE OR WBE.

SIGNATURE (MUST BE PRINCIPAL OWNER, CHIEF EXECUTIVE OFFICER OF CORPORATION) TITLE DATE

SUBSCRIBED AND SWORN BEFORE ME THIS _____ DAY OF _____, 20__

SIGNED _____ COUNTY OF _____ STATE OF _____

Notary Public In and For

MY COMMISSION EXPIRES:

SEAL

STANDARD DOCUMENT LIST

Please submit the following documents which are appropriate for your business entity to be considered for certification with the State of Missouri. **DO NOT send originals.** **Your application will not be considered until ALL required documents are received or until we have a satisfactory explanation of any omission.** Required documents are specified by business type. **Please indicate whether you have enclosed the document or if it does not apply to your business type.**

Business types are the following:

P-Partnership
 LLC-Limited Liability Company Corporation
 C-For Profit Corporation

ENCLOSED OR N/A	DOCUMENT	REQUIRED BY BUSINESS TYPE		
		P	LLC	C
	1a. Proof of minority or female status (e.g. birth certificate or drivers license)	X	X	X
	1b. Naturalized Citizenship documents (if not born in US)	X	X	X
	1c. Native American-Tribal Record from bureau of Indian Affairs (202) 208-6087 or (202) 208-5116	X	X	X
	2a. Registration of Business name (Fictitious name registration) Secretary of State (573) 751-3317	X		
	2b. Registration of Business name (Certificate of Organization)		X	
	2c. Registration of Business name (Certificate of Incorporation)		X	X
	3. State or local certifications, registration of proofs of competence (CPA Certificate, Dept. of Economic Development Certificates, etc.) - Only if necessary for your business to operate. -	X	X	X
	4. Copy of all applicable license(s) and/or permit(s) to operate business (e.g., city/county license, sales permit, federal tax ID number, etc.)	X	X	X
	5. Copy of all current loan agreements	X	X	X
	6. Proof of capital invested and stock purchase by each owner	X	X	X
	7a. Most current Complete Federal and State Tax Form for last three years - 1040 forms & schedules			
	7b. Most current Complete Federal and State Tax Form for last three years - 1065 forms & schedules or documents under (7a) if three years are not available	X	X	
	7c. Most current Complete Federal and State Tax Form for last three years - 1120/1120S forms & schedules or documents under (7a) if three years are not available		X	X
	8. Copy of lease or rental agreement for business site	X	X	X
	9a. Equipment and/or vehicle rental and purchase agreement	X	X	X

ENCLOSED OR N/A	Standard Document List (Continued)	P	LLC	C
	9b. Equipment and/or vehicle proof of purchase (canceled checks, money orders, cashiers check, cash receipt, etc.).	X	X	X
	10. Third party agreements (e.g. management service, equipment rental, purchase agreement, franchise agreement, etc.)	X	X	X
	11. Signed payroll for prior two months or payroll ledger	X	X	X
	12. Bank Signature Cards (ALL Accounts)	X	X	X
	13. Proof of business insurance (worker's compensation, general/professional liability)	X	X	X
	14. Detailed resumes of principals of your company showing education, training and employment, with dates and responsibilities.	X	X	X
	15. Organizational Chart	X	X	X
	16. Company business plan - required for new businesses	X	X	X
	17a. Corporate Documents – Articles of Organization		X	X
	17b. Corporate Documents - Minutes of first organizational meeting.		X	X
	17c. Corporate Documents – Bylaws or Operating Agreement		X	X
	17d. Corporate Documents - Articles of incorporation, including date approved by State			X
	17e. Corporate Documents – Current Annual Registration with Secretary of State's Office			X
	17f. Corporate Documents - Minutes of board and stockholder meetings			X
	17g. Corporate Documents - Stock transfer ledger			X
	17h. Corporate Documents - All stock certificates ever issued (NOT a specimen copy)(both sides)			X
	18a. Partnership Documents - Partnership/Operating Agreement	X	X	
	18b. Partnership Documents - Minutes of meetings	X	X	
	19a. Buyout agreement if not included in By-laws or Partnership Agreement	X	X	
	19b. Profit agreement if not included in By-laws or Partnership Agreement	X	X	
	20. Most recent W-2/1099 for officers and managers of company	X	X	X
	21. Job descriptions for owners, officers and managers of company	X	X	X

Please submit the application and requested documentation to the address on the cover letter

Rapid Response Document List

Please submit the following documents to be considered for rapid response certification with the State of Missouri.

DO NOT send us originals. Your application will not be considered until ***ALL* required documents are received, or until we have a satisfactory explanation of any omission.**

ENCLOSED OR N/A	DOCUMENT
	1. Resume for all owners/investors.
	2. Proof of minority or female status (birth certificate, driver's license, tribal card, etc.)
	3. Provide copy of U.S. Citizenship (if not born in the United States).
	4. Documentation of capital contribution for all owners/investors.
	5. Provide copies of the last 2 years filed income tax returns for your business. <u>Important Note:</u> Firms that are incorporated must include Schedule K-1 or Schedule E. If your firm has been in existence less than one year, provide a current profit/loss statement for your firm. If an extension has been filed, please submit a copy of the paperwork.
	6. Indicate (to the right) who is responsible for the following: (Provide name, title, gender, and ethnicity if not previously included) <ul style="list-style-type: none">• Financial Decisions:• Office Management:• Management Decisions: (i.e. Marketing/sales, hiring/firing of management, purchasing major items, negotiating bonds/ loans, etc.)
	7. Include a copy of your current certification with one of the approved certifying agencies.

Please submit the application and requested documentation to the address on the cover letter.

Sole Proprietor Document List

Please submit the following documents to be considered for certification as a sole proprietor with the State of Missouri. **DO NOT send us originals.** Your application will not be considered until **ALL required documents are received, or until we have a satisfactory explanation of any omission.**

ENCLOSED OR N/A	DOCUMENT
	1. Resume for all owners/investors.
	2. Proof of minority or female status (birth certificate, driver's license, tribal card, etc.)
	3. Registration of Business name (Fictitious name registration) Secretary of State (573) 751-3317
	4. Naturalized Citizenship documentation if not born in the United States.
	5. Provide copies of the last 2 years filed income tax returns. <u>Important Note:</u> Your personal tax returns should contain a Schedule C- Profit or Loss From Business
	6. Company Business Plan-Required only for new businesses (those who have been in business less than one year)
	7. Copy of all applicable licenses(s) and/or permit(s) to operate business (e.g. city county, sales permit, etc.)
	8. Copy of lease or rental agreement. If you are conducting business from your home, please mark NA.
	9. Equipment and/or vehicle rental or purchase agreements. 9a.Proof of purchase for equipment or vehicle.
	10. Signed payroll for prior two months or payroll ledger.
	11. Copy of loan agreements
	12. Proof of Business Insurance

Please submit application and requested documentation to the address on the cover letter.